Senate



General Assembly

File No. 154

February Session, 2018

Substitute Senate Bill No. 154

Senate, April 3, 2018

The Committee on Aging reported through SEN. MCCRORY of the 2nd Dist. and SEN. KELLY of the 21st Dist., Chairpersons of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT INCREASING FUNDING FOR ELDERLY NUTRITION SERVICES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 Section 1. Subsection (a) of section 17b-242 of the general statutes is
- 2 repealed and the following is substituted in lieu thereof (Effective July
- 3 1, 2018):
- 4 (a) The Department of Social Services shall determine the rates to be
- 5 paid to home health care agencies and homemaker-home health aide
- 6 agencies by the state or any town in the state for persons aided or
- 7 cared for by the state or any such town. [For the period from February
- 8 1, 1991, to January 31, 1992, inclusive, payment for each service to the
- 9 state shall be based upon the rate for such service as determined by the
- 10 Office of Health Care Access, except that for those providers whose
- 11 Medicaid rates for the year ending January 31, 1991, exceed the median
- 12 rate, no increase shall be allowed. For those providers whose rates for
- the year ending January 31, 1991, are below the median rate, increases

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shall not exceed the lower of the prior rate increased by the most recent annual increase in the consumer price index for urban consumers or the median rate. In no case shall any such rate exceed the eightieth percentile of rates in effect January 31, 1991, nor shall any rate exceed the charge to the general public for similar services. Rates effective February 1, 1992, shall be based upon rates as determined by 20 the Office of Health Care Access, except that increases shall not exceed the prior year's rate increased by the most recent annual increase in the consumer price index for urban consumers and rates effective February 1, 1992, shall remain in effect through June 30, 1993. Rates effective July 1, 1993, shall be based upon rates as determined by the Office of Health Care Access except if the Medicaid rates for any service for the period ending June 30, 1993, exceed the median rate for such service, the increase effective July 1, 1993, shall not exceed one per cent. If the Medicaid rate for any service for the period ending June 30, 1993, is below the median rate, the increase effective July 1, 1993, 30 shall not exceed the lower of the prior rate increased by one and onehalf times the most recent annual increase in the consumer price index for urban consumers or the median rate plus one per cent.] The Commissioner of Social Services shall establish a fee schedule for home health services to be effective on and after July 1, 1994. The commissioner may annually modify such fee schedule if such modification is needed to ensure that the conversion to an administrative services organization is cost neutral to home health care agencies and homemaker-home health aide agencies in the aggregate and ensures patient access. Utilization may be a factor in determining 40 cost neutrality. The commissioner shall increase the fee schedule for home health services provided under the Connecticut home-care program for the elderly established under section 17b-342, effective July 1, 2000, by two per cent over the fee schedule for home health services for the previous year. Effective July 1, 2018, the commissioner shall increase the fee schedule for meals on wheels provided under the Connecticut home-care program for the elderly by ten per cent over the fee schedule for meals on wheels for the previous year. The commissioner may increase any fee payable to a home health care

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agency or homemaker-home health aide agency upon the application of such an agency evidencing extraordinary costs related to (1) serving persons with AIDS; (2) high-risk maternal and child health care; (3) escort services; or (4) extended hour services. In no case shall any rate or fee exceed the charge to the general public for similar services. A home health care agency or homemaker-home health aide agency which, due to any material change in circumstances, is aggrieved by a rate determined pursuant to this subsection may, within ten days of receipt of written notice of such rate from the Commissioner of Social Services, request in writing a hearing on all items of aggrievement. The commissioner shall, upon the receipt of all documentation necessary to evaluate the request, determine whether there has been such a change in circumstances and shall conduct a hearing if appropriate. The Commissioner of Social Services shall adopt regulations, in accordance with chapter 54, to implement the provisions of this subsection. The commissioner may implement policies and procedures to carry out the provisions of this subsection while in the process of adopting regulations, provided notice of intent to adopt the regulations is [published in the Connecticut Law Journal] posted on the Internet web site of the Department of Social Services and the eRegulations System not later than twenty days after the date of implementing the policies and procedures. Such policies and procedures shall be valid for not longer than nine months.

Sec. 2. Section 17b-343 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2018*):

The Commissioner of Social Services shall establish annually the maximum allowable rate to be paid by agencies for homemaker services, chore person services, companion services, respite care, meals on wheels, adult day care services, case management and assessment services, transportation, mental health counseling and elderly foster care. [, except that the maximum allowable rates in effect July 1, 1990, shall remain in effect during the fiscal years ending June 30, 1992, and June 30, 1993.] The Commissioner of Social Services shall prescribe uniform forms on which agencies providing such services shall report

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their costs for such services. Such rates shall be determined on the basis of a reasonable payment for necessary services rendered. The maximum allowable rates established by the Commissioner of Social Services for the Connecticut home-care program for the elderly established under section 17b-342 shall constitute the rates required under this section until revised in accordance with this section. The Commissioner of Social Services shall establish a fee schedule, to be effective on and after July 1, 1994, for homemaker services, chore person services, companion services, respite care, meals on wheels, adult day care services, case management and assessment services, transportation, mental health counseling and elderly foster care. The commissioner may annually increase [any fee in] the fee schedule based on an increase in the cost of services. The commissioner shall increase the fee schedule effective July 1, 2000, by not less than five per cent, for adult day care services. The commissioner shall increase the fee schedule effective July 1, 2011, by four dollars per person, per day for adult day care services. The commissioner shall increase the fee schedule effective July 1, 2018, for meals on wheels provided under the Connecticut home-care program for the elderly by ten per cent over the fee schedule for meals on wheels for the previous year. Nothing contained in this section shall authorize a payment by the state to any agency for such services in excess of the amount charged by such agency for such services to the general public.

This act shall take effect as follows and shall amend the following sections:				
Section 1	July 1, 2018	17b-242(a)		
Sec. 2	July 1, 2018	17b-343		

Statement of Legislative Commissioners:

In Sections 1 and 2, the effective dates were changed to July 1, 2018, for consistency with other provisions of the sections and new language regarding the fee schedule for meals and wheels was reworded for clarity and consistency with other provisions of the general statutes.

AGE Joint Favorable Subst.

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The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 19 \$	FY 20 \$
Social Services, Dept.	GF - Cost	Up to	Up to
_		\$550,000	\$600,000

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill will result in a state cost to the Department of Social Services (DSS) of up to \$550,000 in FY 19 and \$600,000 in FY 20 associated with increasing the fee schedule for Meals on Wheels under the Connecticut Homecare Program for Elders (CHCPE) by ten percent. Based on FY 17 utilization data, the estimated increase for the fully state-funded CHCPE will cost approximately \$104,400 in FY 19 and \$115,400 in FY 20. The increase for Meals on Wheels under Medicaid waiver programs and the Community First Choice program will result in state costs of approximately \$443,500 in FY 19 and \$490,000 in FY 20. A portion of those costs are related to the CHCPE Medicaid waiver program.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to utilization under the Meals on Wheels program.

OLR Bill Analysis sSB 154

AN ACT INCREASING FUNDING FOR ELDERLY NUTRITION SERVICES.

SUMMARY

This bill requires the Department of Social Services (DSS) commissioner to increase, by 10%, the reimbursement rate for meals on wheels providers under the Connecticut Home Care Program for Elders (CHCPE). Under the bill, the increased rates are effective July 1, 2018 and based on the fee schedule for the previous year.

Under current law, DSS may implement policies and procedures about reimbursements to home health care and homemaker-health aide providers while in the process of adopting regulations, but DSS must publish notice of its intent to adopt the regulations in the *Connecticut Law Journal*. The bill requires DSS to instead post the notice on its website and the state's eRegulations System.

EFFECTIVE DATE: July 1, 2018

BACKGROUND

Connecticut Home Care Program for Elders

CHCPE is a Medicaid waiver and state-funded program that provides a range of home and community-based services for individuals age 65 and older who are at risk for institutionalization. To be eligible for CHCPE, individuals must be under income and asset limits. The state has the authority to limit enrollment or establish wait lists for CHCPE based on available resources.

COMMITTEE ACTION

Aging Committee

Joint Favorable Substitute Yea 12 Nay 0 (03/15/2018)